

GENERAL OFFICES / PARK DEPT.
269/684-0870 FAX 269/684-1996

DEPARTMENT of PUBLIC WORKS
269/684-5647 FAX 269/684-5979

FIRE DEPARTMENT
SOUTH 269/683-3311
FAX 269/683-1633
NORTH 269/683-9440

NILES TOWNSHIP WEB SITE
www.nilestwpmi.gov

NILES CHARTER TOWNSHIP

320 BELL ROAD, NILES, MICHIGAN 49120



OFFICIAL NILES TOWNSHIP TREE – ASHWOOD BURR OAK

BUILDING DEPARTMENT
269/687-2741 FAX 269/687-2726

CODE ENFORCEMENT
269/684-0870 x 20 FAX 269/684-1996

BC SHERIFF'S DEPARTMENT/NILES TWP
866/630-7679

ASSESSOR
269/684-0870 FAX 269/684-1996

ENROLLMENT FORM FOR ELECTRONIC PAYMENT NILES CHARTER TOWNSHIP PROPERTY TAX BILLS

Account Information:

Name _____

Property Address _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

Daytime Tel (____) _____ Property No. 11-14-____-____-____-____-____

11-14-____-____-____-____-____

Financial Institution Information:

Bank Name _____ Checking ____ Savings ____

Routing No. _____ Acct. No. _____

If available, please enclose a voided check or check copy associated with the bank account listed above. The voided check should show the name of your financial institution, the ABA/routing number and your account number. If you have more than two parcels please write additional on back page. ***Please note that this form is authorizing payment of 2009 winter taxes ONLY.***

An additional \$2.00 charge will be added for ACH processing & transaction fees.

Your Signature of Authorization:

For Winter 2009 Taxes Only

I authorize Niles Charter Township to deduct my payment(s) from the checking or savings account indicated above on dates checked below. Please return this form **10** days before the earliest date checked below.

Winter taxes ____ December 31, 2009 or ____ February 16, 2010

Furthermore, I understand that Niles Charter Township may discontinue this service at any time and that penalties apply if the account has insufficient funds on the due date.

Your Signature Is Required

Signature _____ Date _____